

**DECLARATION
Utility Application**

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled **SYSTEM AND METHOD FOR IDENTIFYING A VASCULAR BORDER** the specification of which

(Check One) ☒ is attached hereto OR
☐ was filed on _____ as United States Application Serial No. Not yet assigned or PCT International Application No. _____ and was amended on _____ (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment(s) referred to above.

I acknowledge the duty to disclose information which is material to the patentability of this application in accordance with Title 37, Code of Federal Regulations, § 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code, § 119(a)-(d) or § 365(b) of any foreign application(s) for patent or inventor's certificate, or § 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Date of Filing	Priority Claimed	
			Yes	No

I hereby claim the benefit under Title 35, United States Code §119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date	Application Number(s)	Filing Date
60/406,183	August 26, 2002	60/406,184	August 26, 2002
60/406,254	August 26, 2002	60/406,185	August 26, 2002
60/406,148	August 26, 2002	60/406,234	August 26, 2002

I hereby claim the benefit under Title 35, United States Code, § 120 of any United States application(s), or § 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of Title 35, United States Code, § 112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations § 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application Number	PCT Parent Number	Parent Filing Date	Status-Patented, Pending or Abandoned

I further declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements are made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Title 18, United States Code, § 1001 and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

201	FULL NAME OF INVENTOR	FIRST Name Jon	MIDDLE Initial D.	LAST Name Klingensmith	
	RESIDENCE & CITIZENSHIP	City Shaker Heights	State or Foreign Country Ohio	Country of Citizenship USA	
	POST OFFICE ADDRESS	16211 Van Aken Blvd. #107	City Shaker Heights	State or Country OH	Zip Code 44120
INVENTOR'S SIGNATURE <u>Jon D. Klingensmith</u> DATE <u>8/26/03</u>					

202	FULL NAME OF INVENTOR	FIRST Name D.	MIDDLE Initial Geoffrey	LAST Name Vince	
	RESIDENCE & CITIZENSHIP	City Avon Lake	State or Foreign Country Ohio	Country of Citizenship United Kingdom	
	POST OFFICE ADDRESS	300 Williamsburg Drive	City Avon Lake	State or Country OH	Zip Code 44012
INVENTOR'S SIGNATURE <u>Geoffrey Vince</u> DATE <u>8/26/03</u>					

203	FULL NAME OF INVENTOR	FIRST Name Anuja	MIDDLE Initial	LAST Name Nair	
	RESIDENCE & CITIZENSHIP	City Cleveland Heights	State or Foreign Country Ohio	Country of Citizenship India	
	POST OFFICE ADDRESS	2616 Mayfield Road, Apt. #3	City Cleveland Heights	State or Country OH	Zip Code 44106
INVENTOR'S SIGNATURE <u>Anuja Nair</u> DATE <u>8/26/03</u>					

204	FULL NAME OF INVENTOR	FIRST Name Barry	MIDDLE Initial D.	LAST Name Kuban	
	RESIDENCE & CITIZENSHIP	City Avon Lake	State or Foreign Country Ohio	Country of Citizenship USA	
	POST OFFICE ADDRESS	427 Moorewood Avenue	City Avon Lake	State or Country OH	Zip Code 44012
INVENTOR'S SIGNATURE <u>Barry D. Kuban</u> DATE <u>8/26/03</u>					